

(07.25.03)

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/626,719

FILING DATE

APPLICANT(S)

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
IND	DEP	IND	DEP	IND	DEP
1					
2					
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48					
49					
50					
TOTAL IND.	4	4			
TOTAL DEP.		0			
TOTAL CLAIMS	4	4			

CLAIMS							
IND	DEP	IND	DEP	IND	DEP	IND	DEP
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100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							